

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>MA</i>	<i>6784</i>	<i>7/1/00</i>
O.I.P.E. CLASSIFIER		<i>31</i>	<i>7/27/00</i>
FORMALITY REVIEW	<i>MA</i>	<i>830</i>	<i>8-15-00</i>
RESPONSE FORMALITY REVIEW	<i>MA</i>	<i>59667</i>	<i>8-2-02</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
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47	✓
48	✓
49	✓
50	✓

Claim	Date
Final Original	
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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